	Effective December 29, 1999 O9 620586													
CLAIMS AS FILED - PART I (Column 1) (Column 2)										L ENTITY	 	OTHER THAN OR SMALL ENTITY		
FOR			NUMB	ER FILED		NUMBER EXTRA			RATE		٦¨¨	RATE	FEE	1
BASIC FEE				**************************************							OR	33.20	690.00	1
TOTAL CLAIMS			57. minus 20= · 36						X\$ 9=	**	ОЯ	V240	648	
IN	DEPENDENT C	LAIMS	/ minus 3 = * /						X39=	-	1	V70	1	1
MULTIPLE DEPENDENT CLAIM PRESENT										+	OR		78	
* If the difference in column 1 is less than zero, enter "0" in column 2									+130=	┿	OR		400	
			•		TOTAL	· L	JOR	TOTAL	1676					
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									SMALI	ENTITY	OR	OTHER SMALL		
AMENDMENT A		REM AF	AIMS AINING TER IDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 4	06,	Minus	**	63	= 3		X\$ 9=		OR	X\$18=	54	PH
	Independent FIRST PRESE	NITATIC	MOEN!	Minus	PENE		=		X39=		OR	X78=		
	/	MIANC	N OF MI	DLIPLE DE	PENL	JEN! CLAIM			+130=	1	OR	+260=		
								L	TOTA		1,	TOTAL		
		(Colu	ımn 1)		(C	Column 2)	(Column 3)	A	ADDIT. FEI	<u> </u>		ADDIT. FEE	<u></u>	
AMENDMENT B	11/01/04	REM.	AIMS AINING TER IDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 7	<u>0</u>	Minus		66	= 4		X\$ 9=		OR	X\$18=	720	
	Independent	NITATIO	/	Minus		4	=		X39=		OR	X78=	101	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								l	+130=		OR	+260=		
								A	TOTAL DDIT, FEE		OR	TOTAL ADDIT, FEE		
- 1			imn 1)			olumn 2)	(Column 3)							
MENT C		REMA AF	VINING TER DMENT		PR	HIGHEST NUMBER EVIOUSLY VAID FOR	PRESENT EXTRA	\int	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL FEE	
AMENDMEN	Total	-6	0	Minus	**	56	= 1	_	X\$ 9=		OR	X\$18=	54	10
AME	Independent	•	4	Minus			=	F	X39=		lt	X78=	SJ 9	Pie
	FIRST_PRESE	N OF MU	LTIPLE DEF	+		 	OR							
" If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								L	+130= TOTAL		OR	+260=		
!!	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number.											TOTAL ODIT. FEE		
T	ne "Highest Numi	ber Previ	ously Paid	For (Total or	Indep	endent) is the	highest number	found	d in the ap	propriate bo	k in colu	ımn 1.		

FORM PTO-875 (Rev. 12/99) Application or Docket Number